



# DONATION REQUEST FORM

Date of Event: \_\_\_\_\_ Today's Date: \_\_\_\_\_

Organization: \_\_\_\_\_

Is this a 501(c)(3) non-profit organization?    Y     N     501(c)(3) Tax ID #: \_\_\_\_\_

Contact Name: \_\_\_\_\_ Phone: \_\_\_\_\_

Address: \_\_\_\_\_

City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_

E-mail Address: \_\_\_\_\_

Specific Request: *(i.e., merchandise suggestions and what it will be used for; ad for program book: include costs, sizes and deadline.)*

What will the funds from this event be used for?

How will English Gardens be promoted?

Which English Gardens store would you like to pick up the donation? *(please mark)*

Ann Arbor     Clinton Twp.     Dearborn Heights     Eastpointe     Royal Oak/Troy     West Bloomfield

Please attach any information to support your request. **No phone calls please.**

**Send at least one month prior to date needed to:**

Marketing Department  
English Gardens  
6370 Orchard Lake Rd.  
West Bloomfield, MI 48322  
FAX: 248-855-0646

English Gardens Use:

Date Received: \_\_\_\_\_

Action: \_\_\_\_\_